

# **Application Data Sheet**

### **Application Information**

Application number:: 09/896,812

Filing Date:: 06/29/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: LIPOSOMAL ANTINEOPLASTIC DRUGS AND

**USES THEREOF** 

Attorney Docket Number:: 16303-008030

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Thomas

Middle Name:: D.

Family Name:: Madden

Name Suffix::

City of Residence:: Vancouver

State or Province of Residence:: B.C.

Country of Residence:: Canada

Street of Mailing Address:: 2714 West 31st Avenue

City of Mailing Address:: Vancouver

State or Province of mailing address:: B.C.

Country of mailing address:: Canada

Postal or Zip Code of mailing address:: V6L 2A1

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Sean

Middle Name:: C.

Family Name:: Semple

Name Suffix::

City of Residence:: Vancouver

State or Province of Residence:: B.C.

Country of Residence:: Canada

Street of Mailing Address:: 2201 - 588 Broughton Street

City of Mailing Address:: Vancouver

State or Province of mailing address:: B.C.

Page 2 Supplemental 09/896,812 6/29/01 12/17/01

Country of mailing address::

Canada

Postal or Zip Code of mailing address:: V6G 3E3

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada

Status::

Full Capacity

Given Name::

Quet

Middle Name::

F.

Family Name::

Ahkong

Name Suffix::

City of Residence::

Surrey

State or Province of Residence::

B.C>

Country of Residence::

Canada

Street of Mailing Address::

8588, 143rd Street

City of Mailing Address::

Surrey

State or Province of mailing address::

B.C.

Country of mailing address::

Canada

Postal or Zip Code of mailing address:: V3W 0N9

### **Correspondence Information**

Correspondence Customer Number::

20350

## **Domestic Priority Information**

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

This Application

Non-Provisional of

60/264,616

01/25/01

09/896,812

Non-Provisional of

60/215,556

06/30/00